

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

24

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

mrs.

Jennifer

M

NICKNAME

LAST

SUFFIX

Trevino

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

4917 Robinson St. Fort Worth, TX

76114

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

319 - 5876

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mrs.

Sara

P

NICKNAME

LAST

SUFFIX

Lynch

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

1601 College Ave Fort Worth, TX 76104

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

723 - 2917

9 REPORT TYPE



January 15



30th day before election



Runoff



15th day after campaign  
treasurer appointment  
(Officeholder Only)



July 15



8th day before election



Exceeded \$500 limit



Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

08 / 09 / 2016

THROUGH

Month

Day

Year

12 / 31 / 2016

11 ELECTION

ELECTION DATE

Month

Day

Year

05 / 06 / 17

ELECTION TYPE



Primary



Runoff



Other  
Description



General



Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Fort Worth City Council  
District 2

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

Jennifer Trevino

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE  
☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 276.50

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 10,617.02

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 334.73

4. TOTAL POLITICAL EXPENDITURES

\$ 3,865.11

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

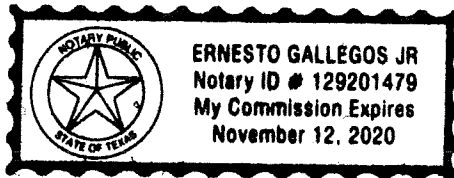
\$ 6,751.91

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Jennifer Trevino  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ERNESTO GALLEGOS JR. this the 16<sup>th</sup> day of JAN, 20 17, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

ERNESTO GALLEGOS JR.

Printed name of officer administering oath

Notary Public

Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Jennifer Trevino

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1. ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 8645.00

2. ☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$ 1695.52

3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. ☐ SCHEDULE E: LOANS

\$

5. ☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 3530.38

6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. ☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS  
RETURNED TO FILER

\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/2/16

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Douglas Ferrer

6 Contributor address;

City; State; Zip Code

222 Lake Carnegie Ct. Laredo, TX 78041

7 Amount of contribution (\$)

100<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/2/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Shiravn Palmer

Contributor address;

City; State; Zip Code

PO Box 121458 Fort Worth, TX 76121

Amount of contribution (\$)

100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/2/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linda Pedraza

Contributor address;

City; State; Zip Code

44754 Sun Valley Dr. King City, CA 93930

Amount of contribution (\$)

100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/2/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lisa Pereda

Contributor address;

City; State; Zip Code

731 Nightingale Circle Mansfield, TX 76063

Amount of contribution (\$)

100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/2/16

5 Full name of contributor

Ray Pereda

☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

100<sup>00</sup>

6 Contributor address;

City; State; Zip Code

6404 Tuscan Dr. Arlington, TX 76016

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/2/16

Full name of contributor

Anette Soto

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

4749 Braden Dr. Fort Worth, TX 76137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/2/16

Full name of contributor

Jennifer Trevino

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$150<sup>00</sup>

Contributor address;

City; State; Zip Code

4917 Robinson St. Fort Worth, TX 76114

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/2/16

Full name of contributor

John Pereda

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$500<sup>00</sup>

Contributor address;

City; State; Zip Code

5121 Kaltenbrun Rd Fort Worth, TX 76119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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1 Total pages Schedule A1: 19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/3/16

5 Full name of contributor ☐ out-of-state PAC (ID#:

Catarina Bonilla

7 Amount of contribution (\$)

\$100<sup>00</sup>

6 Contributor address; City; State; Zip Code

362 Foch St. Fort Worth, TX 76107

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/4/16

Full name of contributor ☐ out-of-state PAC (ID#:

Sara Lynch

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address; City; State; Zip Code

1601 College Ave Fort Worth, TX 76104

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/4/16

Full name of contributor ☐ out-of-state PAC (ID#:

Eva Bonilla

Amount of contribution (\$)

\$200<sup>00</sup>

Contributor address; City; State; Zip Code

362 Foch St. Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/6/16

Full name of contributor ☐ out-of-state PAC (ID#:

Bill Cron

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address; City; State; Zip Code

3617 Cliff View Loop Weatherford, TX 76087

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/6/16

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Veronica Villegas

6 Contributor address; City; State; Zip Code

1330 6th Ave Fort Worth, TX 76104

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/6/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jackie Williams

Contributor address; City; State; Zip Code

2607 Greenbriar Dr. Mansfield, TX 76063

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/10/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Adagui Aguilera Gomez

Contributor address; City; State; Zip Code

11004 Dillon St. Fort Worth, TX 76179

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/10/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Silvia + Rod Borbolla

Contributor address; City; State; Zip Code

4015 modlin Ave Fort Worth, TX 76107

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/11/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Anita Craig

7 Amount of contribution (\$)

\$100<sup>00</sup>

6 Contributor address;

City; State; Zip Code

804 Quail Park Lane Cleburne, TX 76031

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/11/16

Full name of contributor

☐ out-of-state PAC (ID#:

Vincent Craig

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

804 Quail Park Lane Cleburne, TX 76031

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/12/16

Full name of contributor

☐ out-of-state PAC (ID#:

Carmen Castro

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

6710 Bighorn Ridge Arlington, TX 76002

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/12/16

Full name of contributor

☐ out-of-state PAC (ID#:

Lee Hanley

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

650 Brademas Ct. Simi Valley, CA 93065

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/15/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Katie + Brian Gage

6 Contributor address;

City; State; Zip Code

15814 Longvale Houston, TX 77059

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Teno Villareal

Contributor address;

City; State; Zip Code

6010 E. Jolie Ct. San Antonio, TX 78240

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Bill Wempe

Contributor address;

City; State; Zip Code

8000 Geranium Lane Fort Worth, TX 76123

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/24/16

Full name of contributor

☐ out-of-state PAC (ID#:

Tracy Lechler

Contributor address;

City; State; Zip Code

19516 Vilamouira Pflugerville, TX 78660

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/26/16

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Becky Wortele

6 Contributor address; City; State; Zip Code

5000 Spanish River Tr. Fort Worth, TX 76137

7 Amount of contribution (\$)

\$100<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/26/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Medrano

Contributor address; City; State; Zip Code

PO Box 2309 Lathabra, CA

Amount of contribution (\$)

\$100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/26/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Evelyn Hughes

Contributor address; City; State; Zip Code

5130 N. 78th Place Scottsdale, AZ 85253

Amount of contribution (\$)

\$100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/27/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Fernando Vasquez

Contributor address; City; State; Zip Code

5020 Fall River Dr. Fort Worth, TX 76103

Amount of contribution (\$)

\$100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **19**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date

**9/28/16**

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

**Michelle Crim**

6 Contributor address; City; State; Zip Code

**6833 Kirk Dr. Fort Worth, TX 76116**

7 Amount of contribution (\$)

**\$50<sup>00</sup>**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**9/28/16**

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

**Sandra Garcia**

Contributor address; City; State; Zip Code

**6200 Pershing Ave #119 Fort Worth, TX 76116**

Amount of contribution (\$)

**\$100<sup>00</sup>**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**9/29/16**

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

**Bob (Robert) Horton**

Contributor address; City; State; Zip Code

**904 Autumn Falls Dr. Fort Worth, TX 76116**

Amount of contribution (\$)

**\$100<sup>00</sup>**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**9/30/16**

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

**Rachel Chasteen**

Contributor address; City; State; Zip Code

**3912 Felisa Place Fort Worth, TX 76133**

Amount of contribution (\$)

**\$100<sup>00</sup>**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/30/16

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Olga Gallegos

6 Contributor address;

City; State; Zip Code

4816 Robinson St. Fort Worth, TX 76114

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert Lopez

Contributor address;

City; State; Zip Code

2508 Capri Dr. Fort Worth, TX 76114

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mary Lou Martinez

Contributor address;

City; State; Zip Code

4900 Terrace Trail Fort Worth, TX 76114

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brenda Pereda

Contributor address;

City; State; Zip Code

1425 Alston Ave Fort Worth, TX 76104

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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1 Total pages Schedule A1:

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2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/30/16

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Deya Reyes

6 Contributor address;

City; State; Zip Code

2258 Capri Dr. Fort Worth TX 76114

7 Amount of contribution (\$)

\$100<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Veronica Rios

Contributor address;

City; State; Zip Code

5704 Deerfoot Tr Fort Worth, TX 76131

Amount of contribution (\$)

\$100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Manuel Trevino

Contributor address;

City; State; Zip Code

14650 White Settlement Fort Worth, TX 76108

Amount of contribution (\$)

\$100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jeremy Tejada

Contributor address;

City; State; Zip Code

6512 Rutherford Rd. Dallas, TX 75023

Amount of contribution (\$)

\$100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

9/30/16

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

The Brittain Kalish Group

6 Contributor address;

City; State; Zip Code

PO Box 8577 Fort Worth, TX 76124

7 Amount of contribution (\$)

\$100<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Pat Alva-Green

Contributor address;

City; State; Zip Code

PO Box 2698 Denton, TX 76202

Amount of contribution (\$)

\$150<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Silvia Luna

Contributor address;

City; State; Zip Code

4708 Tony Ct. Fort Worth, TX 76135

Amount of contribution (\$)

\$200<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/3/16

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Victoria Ruiz

Contributor address;

City; State; Zip Code

10132 Chapel Springs Trail Fort Worth, TX 76116

Amount of contribution (\$)

\$100<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

10/31/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Lupe Arriola

7 Amount of contribution (\$)

\$100<sup>00</sup>

6 Contributor address;

City; State; Zip Code

616 3rd St. ~~Montebello~~ Montebello, CA 90640

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/31/16

Full name of contributor

☐ out-of-state PAC (ID#:

Don Boren

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

1755 Martel Ave Fort Worth, TX 76103

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/31/16

Full name of contributor

☐ out-of-state PAC (ID#:

Aracely Chavez

Amount of contribution (\$)

\$150<sup>00</sup>

Contributor address;

City; State; Zip Code

6920 Wicks Trail Fort Worth, TX 76133

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/31/16

Full name of contributor

☐ out-of-state PAC (ID#:

Valerie Martinez

Amount of contribution (\$)

\$200<sup>00</sup>

Contributor address;

City; State; Zip Code

121 Copperwood Dr. Lakeside, TX 76108

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

10/31/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Danny Jensen

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City; State; Zip Code

4004 Hartwood Dr. Fort Worth, TX 76109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/20/16

Full name of contributor

☐ out-of-state PAC (ID#:

Ed Riefenstahl

Amount of contribution (\$)

\$75.00

Contributor address;

City; State; Zip Code

2116 Lake Crest Dr. Grapevine, TX 76051

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/7/16

Full name of contributor

☐ out-of-state PAC (ID#:

Eric Spillane

Amount of contribution (\$)

\$150.00

Contributor address;

City; State; Zip Code

1322 W Dallas St. Houston, TX 77019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/15/16

Full name of contributor

☐ out-of-state PAC (ID#:

Amanda Arizola

Amount of contribution (\$)

\$150.00

Contributor address;

City; State; Zip Code

Po Box 430 Hurst, TX 76053

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

12/16/16

5 Full name of contributor

Joan Crittendon

☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

\$50<sup>00</sup>

6 Contributor address;

City; State; Zip Code

4800 Terrace Trail Fort Worth, TX 76114

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/16/16

Full name of contributor

Larry Anfin

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$60<sup>00</sup>

Contributor address;

City; State; Zip Code

7020 Castle Creek Ct Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/16/16

Full name of contributor

Barbara Brittain

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

4724 Lake Havasu Trl Fort Worth, TX 76103

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/16/16

Full name of contributor

Kristi Monoz

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

3609 Rensel Blvd Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

12/16/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Celia Garza

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

4801 Barberrry Dr Fort Worth, TX 76133

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/18/16

Full name of contributor

☐ out-of-state PAC (ID#:

Alden Karotkin

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

4759 Overton Woods Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Elizabeth Beck

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

2717 Ryan Ave Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Elizabeth Surita Khvat

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

6817 Muleshoe Lane Fort Worth, TX 76179

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

12/19/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Elvira Monoz

6 Contributor address;

City; State; Zip Code

5500 Oakmont Lane Fort Worth, TX 76112

7 Amount of contribution (\$)

\$5000

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Denise Lopez

Contributor address;

City; State; Zip Code

3320 NW Lorraine Fort Worth, TX 76106

Amount of contribution (\$)

\$6000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Sergio Yanes

Contributor address;

City; State; Zip Code

4422 Pershing Ave Fort Worth, TX 76107

Amount of contribution (\$)

\$1000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Kathy Spicer

Contributor address;

City; State; Zip Code

6038 Lovell Ave Fort Worth, TX 76116

Amount of contribution (\$)

\$1000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

12/19/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Eva Bonilla

7 Amount of contribution (\$)

\$100<sup>00</sup>

6 Contributor address;

City; State; Zip Code

362 Foch St. Fort Worth, TX 76107

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Camille Hill

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

5309 Joshua Ct Fort Worth, TX 76114

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Irene Chase

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

3463 W. Fuller Ave Fort Worth, TX 76133

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/16

Full name of contributor

☐ out-of-state PAC (ID#:

Laura Kinkade

Amount of contribution (\$)

\$100<sup>00</sup>

Contributor address;

City; State; Zip Code

7955 Mellie Ct. Fort Worth, TX 76123

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 19

2 FILER NAME Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

12/19/16

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Anna Alvarado

7 Amount of contribution (\$)

\$150<sup>00</sup>

6 Contributor address; City; State; Zip Code

3809 Westcliff Rd S. Fort Worth, TX 76109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/19/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Catarina Bonilla

Amount of contribution (\$)

\$200<sup>00</sup>

Contributor address; City; State; Zip Code

362 Foch St. Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Francisco Lopez

Amount of contribution (\$)

\$250<sup>00</sup>

Contributor address; City; State; Zip Code

5033 Portridge Dr. Fort Worth, TX 76135

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/27/16

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alison Harris Bosick

Amount of contribution (\$)

\$50<sup>00</sup>

Contributor address; City; State; Zip Code

3512 Arborlawn Dr. Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>19</b>
2 FILER NAME <b>Jennifer Trevino</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/29/16</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Douglas Ferrier</b> 6 Contributor address; City; State; Zip Code <b>222 Lake Carnegie Ct. Larido, TX 78041</b>	7 Amount of contribution (\$) <b>\$100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>9/2/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gloria Baeza</b> Contributor address; City; State; Zip Code <b>4741 N. Firecroft Ave. Covina, CA 91722</b>	Amount of contribution (\$) <b>\$50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>9/12/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michael Marshall</b> Contributor address; City; State; Zip Code <b>400 W. Peachtree St. NW Atlanta, GA 30308</b>	Amount of contribution (\$) <b>\$100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>9/13/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Danielle Marshall</b> Contributor address; City; State; Zip Code <b>400 W. Peachtree St. NW Atlanta GA 30308</b>	Amount of contribution (\$) <b>\$100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **1**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ **1695.52**

5 Date

**9/27/16**

6 Full name of contributor ☐ out-of-state PAC (ID#:

**Chadra Mezza - Christina Elbitar**

7 Contributor address; City; State; Zip Code

**1622 Park Pl Ave Fort Worth, TX 76110**

8 Amount of Contribution \$

**\$1500.00**

9 In-kind contribution description

**Food for campaign Kick off**

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

**owner**

11 Employer (FOR NON-JUDICIAL) (See Instructions)

**Self**

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

**9/27/16**

Full name of contributor ☐ out-of-state PAC (ID#:

**Chris + Jennifer Trevino**

Contributor address; City; State; Zip Code

**4917 Robinson St. Fort Worth, TX 76114**

Amount of Contribution \$

**\$195.52**

In-kind contribution description

**wine for Kick off event**

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>3</u>		2 FILER NAME <u>Jennifer Trevino</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>9/29/16</u>		5 Payee name <u>Wix.com</u>			
6 Amount (\$) <u>\$168.00</u>		7 Payee address; City; State; Zip Code <u>P.O. Box 40190 San Francisco, CA</u>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense (website)</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>10/24/16</u>		Payee name <u>Costco.com</u>			
Amount (\$) <u>\$757.74</u>		Payee address; City; State; Zip Code <u>P.O. Box 34331 Seattle, WA 98124</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <u>Other (laptop)</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>10/24/16</u>		Payee name <u>Costco.com</u>			
Amount (\$) <u>\$135.30</u>		Payee address; City; State; Zip Code <u>P.O. Box 34331 Seattle, WA 98124</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <u>Other (software)</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>3</b>		2 FILER NAME <b>Jennifer Trevino</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>11/15/16</b>		5 Payee name <b>Los Vaqueros</b>			
6 Amount (\$) <b>\$500.00</b>		7 Payee address; City; State; Zip Code <b>2629 North Main Fort Worth, TX 76164</b>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <b>Event Expense (down pmt)</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>11/14/16</b>		Payee name <b>Halos Dance Event</b>			
Amount (\$) <b>\$280.00</b>		Payee address; City; State; Zip Code <b>P.O. Box 161513 Fort Worth, TX 76161</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>Other (Dance Event)</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>12/16/16</b>		Payee name <b>Los Vaqueros</b>			
Amount (\$) <b>\$1276.25</b>		Payee address; City; State; Zip Code <b>2629 North Main St. Fort Worth, TX 76164</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>Event Expense / Food / Beverage Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <div style="font-size: 2em;">3</div>	<b>2</b> FILER NAME <div style="font-size: 1.5em;">Jennifer Trevino</div>	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date <div style="font-size: 1.5em;">12/27/16</div>	<b>5</b> Payee name <div style="font-size: 1.5em;">Artes de la Rose (Constable Christmas)</div>				
<b>6</b> Amount (\$) <div style="font-size: 1.5em;">\$150.00</div>	<b>7</b> Payee address; City; State; Zip Code <div style="font-size: 1.5em;">1440 N. Main St. Fort Worth, TX 76164</div>				
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">other</div>				
	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width:100%;"> <tr> <td style="width:30%;">Candidate / Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:40%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date <div style="font-size: 1.5em;">9/28/16</div>	Payee name <div style="font-size: 1.5em;">Carlos Ortega (reimbursement)</div>				
Amount (\$) <div style="font-size: 1.5em;">\$132.93</div>	Payee address; City; State; Zip Code <div style="font-size: 1.5em;">2505 Capri Dr. Fort Worth, TX 76114</div>				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">other (banners)</div>				
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<table border="0" style="width:100%;"> <tr> <td style="width:30%;">Candidate / Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:40%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date <div style="font-size: 1.5em;">8/9/16-12/31/16</div>	Payee name <div style="font-size: 1.5em;">PayPal, Inc.</div>				
Amount (\$) <div style="font-size: 1.5em;">\$130.16</div>	Payee address; City; State; Zip Code <div style="font-size: 1.5em;">2211 North First Street San Jose, CA 95131</div>				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">other (fees)</div>				
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<table border="0" style="width:100%;"> <tr> <td style="width:30%;">Candidate / Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:40%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**